

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2018 APR -2 AM 11: 05

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:
Blackfoot Health & Wellness Center, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:
255 N. Hwy 91, Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different)

3. The name of the registered agent and the street address of the registered agent:
PH Corporate Services, LLC 4445 W. 1200 N., Dayton, ID 83212

(Name)

(Address cannot be a post office box or postal (P.O.) box)

4. The name and address of at least one governor of the limited liability company:
Leland Phelps 255 N. Hwy 91, Blackfoot, ID 83221

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):
399 N. Main St., Ste. 300, Logan, UT 84321

(Address)

Signature of organizer(s)

Signature: *Leland Phelps*

Printed Name: Leland Phelps

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/02/2018 05:00

CK:17244302 CT:172099 BH:1635694

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